

<b>CLAIM FOR DAMAGE, INJURY, OR DEATH</b>		<b>INSTRUCTIONS:</b> Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency:  Federal Bureau of Investigation - US Department of Justice 450 Golden Gate Avenue, 13th Floor San Francisco, CA 94102-9523			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code.  Charles Cortez c/o Law Office of John L. Burris 7677 Oakport Street, Suite 1120 Oakland CA 94621		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN		4. DATE OF BIRTH [REDACTED]	5. MARITAL STATUS Single	6. DATE AND DAY OF ACCIDENT 9/13/2021	
7. TIME (A.M. OR P.M.) Unknown					
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary).  See attachment A					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code).  N/A					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side).  N/A					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT.  See Attachment A					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
Dorian Dawson  Faisal Alomari  Mohammed Aldahmi		N/A; Number: [REDACTED] [REDACTED] [REDACTED]			
12. (See instructions on reverse). AMOUNT OF CLAIM (in dollars)					
12a. PROPERTY DAMAGE  N/A		12b. PERSONAL INJURY  \$4 Million		12c. WRONGFUL DEATH  Yes	
12d. TOTAL (Failure to specify may cause forfeiture of your rights).  \$4 Million					
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side).  			13b. PHONE NUMBER OF PERSON SIGNING FORM  510-839-5200		14. DATE OF SIGNATURE  3/15/2022
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM  The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS  Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		

**INSURANCE COVERAGE**

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☒ No

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☒ No

17. If deductible, state amount.

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

N/A

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☒ No

**INSTRUCTIONS**

**Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.**

**Complete all items - Insert the word NONE where applicable.**

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

**Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.**

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filled by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A **SUM CERTAIN** FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN **TWO YEARS** AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) **Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.**

**PRIVACY ACT NOTICE**

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.

C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.

D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

**PAPERWORK REDUCTION ACT NOTICE**

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Torts Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.



**LAW OFFICE OF JOHN L. BURRIS**

7677 Oakport Street Suite 1120 Oakland, CA 94621 (510) 839-5200 [www.johnburrislaw.com](http://www.johnburrislaw.com)

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**ATTACHMENT “A – WRONGFUL DEATH CLAIM”**

Claimants object to your Claim Form because it requires information which constitutes an invasion of the Claimant’s privacy. Moreover, the information is not required to be provided by the Claimants under California Government Code Section 910. For example, California Government Code Section 910 does not require that the Claimants provide their home and work numbers, driver’s license number, date of birth, auto insurance name and policy number, a diagram of the location of the incident, any statements by the Claimants as to their reasons “for believing the City is liable for your damages, “or a description” of all damages which you believe you have incurred as a result of the incident.” For the purposes of this document “CLAIMANTS” means the individual claimants and all parties in interest represented by the LAW OFFICES OF JOHN BURRIS. Therefore, Claimants submits the following information in support of his Claim pursuant to Government Code Section 910:

CLAIMANTS NAME: Charles Cortez & Hilma Cortez

ADDRESS TO WHICH ALL NOTICES ARE TO BE SENT: LAW OFFICES OF JOHN L. BURRIS, 7677 Oakport Street, Suite 1120, Oakland, California 94621

CLAIMANTS TELEPHONE NUMBER: C/O LAW OFFICES OF JOHN L. BURRIS, ESQ. (510) 839-5200.

PLEASE NOTE: COUNSEL REPRESENTS CLAIMANTS’ AND ALL CONTACT SHOULD BE MADE WITH THEIR ATTORNEY ONLY.

DATE AND TIME OF INCIDENT: September 13, 2021

LOCATION OF INCIDENT: At or near 2585 Fruitvale Ave, Oakland, CA 94601.

THE FOLLOWING PROVIDES A GENERAL DESCRIPTION OF THE INDEBTEDNESS, OBLIGATION, INJURY, DAMAGES OR LOSS INCURRED SO FAR AS IT MAY BE KNOWN AT THE TIME OF PRESENTATION OF THE CLAIM” AND “THE NAME OR NAMES OF THE PUBLIC EMPLOYEE OR EMPLOYEES CAUSING THE INJURY, DAMAGES, OR LOSS, IF KNOWN: [Per Government Code Section 910]. For the purposes of this claim, “AGENCY’S” is defined by and refers to the municipal, county, or government entity, which governs the Federal Bureau of Investigation

**DESCRIPTION OF INCIDENT:**

The incident took place on September 13, 2021 at or near 2585 Fruitvale Ave, Oakland, CA 94601. The incident arose when a plain clothed FBI agent came into contact with Mr. Cortez who was purchasing items from a local corner store. On the date of the incident, there was an outstanding warrant for Mr. Cortez’s arrest. However, the issues related to his outstanding warrant are not the subject matter of this claim. Our concern is Mr. Cortez’s contact with the FBI agent who violently murdered him without just cause.

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On the date of this incident, Mr. Cortez was in the U-U Smoke Shop purchasing items while his friend, Mr. Dawson, waited outside the smoke shop. Mr. Dawson stated that as he waited outside the smoke shop for Mr. Cortez to exit, he noticed a white car pull up behind him and park on the corner of Fruitvale Ave and Blossom Street. Mr. Dawson then turned to his left and saw a white male get out of the vehicle on the driver's side of the car and run around the front of the car. Mr. Dawson stated that the white male was wearing plain clothes and as he ran around the front of the car he was carrying what Mr. Dawson thought was a weapon. Video footage that was released by the Oakland Police Department, outside of the U-U Smoke Shop showed that the white male was carrying an object that resembled a gun as he entered the shop. Mr. Dawson stated that the white male then pushed past him yelling, "Get out the way" as he entered the U-U Smoke Shop. Mr. Dawson was afraid because he believed the man had a weapon so he moved down Blossom Street. Within seconds, Mr. Dawson heard a gunshot. Mr. Dawson did not hear the white male identify himself as a law enforcement agent nor did he hear the white male make any commands to Mr. Cortez once he entered the store.

In addition, Mohammed Aldahmi, who works at U-U Smoke Shop as a clerk and sold Mr. Cortez the items on September 13, 2021, stated that he saw a person dressed in regular clothes run into the store pointing a gun. Mr. Aldahmi thought it was a robbery, therefore he ran into a safe area. Mr. Aldahmi, is unaware if the white male identified himself as a law enforcement agent or made any commands to Mr. Cortez. Mr. Aldahmi only heard a single gunshot within seconds of the FBI agent entering the store.

**DAMAGES**

As a result of the FBI agent, whose identity has not yet been ascertained, actions, Mr. Cortez lost his life. Mr. Cortez did not pose a threat of serious injury or harm to the FBI agent during this incident. Thus, the violent assault on Mr. Cortez constituted excessive, unreasonable, unlawful and unnecessary force against him by the FBI agent and DOES 1-100.

**DESCRIPTION OF CLAIM:**

Claimants alleges that the conduct of individual employees, agents, and/or servants of the United States Department of Justice – Federal Bureau of Investigations constitute State statutory and federal tort violations, which might include but are not limited to assault, battery, negligence, negligent hiring, and intentional infliction of emotional distress.

Claimants alleges those individual employees, agents and/or servants of the Federal Bureau of Investigation are responsible for decedent's injuries, and acts and/or omissions committed within the course or scope of employment under the theory of respondeat superior. Respondeat superior liability includes but is not limited to, negligent training, supervision, control and/or discipline.

Claimants allege the appropriate offenses listed below.

Claimants will allege a lack of training, supervision and accountability.

Claimants will allege wrongful death.



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Claimants will allege loss of familial relationship.

Claimants will allege other causes of action subject to continuing discovery.

**DESCRIBE INJURY OR DAMAGE:**

Claimants has, or may have in the future, claims for general damages, including, but not limited to, claims for pain, suffering and emotional distress, and loss of familial relationship in amounts that exceed 75,000 and determined according to proof.

**NAME OF ENTITY BELIEVED TO HAVE CAUSED INJURY OR DAMAGE:**

**Federal Bureau of Investigation and DOES 1-100**

**DEMAND FOR PRESERVATION OF EVIDENCE:**

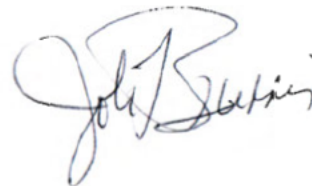
Claimants do hereby demand that Federal Bureau of Investigation maintain and preserve any and all evidence, documents and tangible materials which relate in any manner whatsoever to the subject matter of this federal Claim, including until the completion of any and all civil and/or criminal litigation arising from the events which are the subject matter of this Claim. This demand for preservation of evidence includes, but is not limited to, a demand that all public safety entities preserve all tapes, logs and/or other tangible materials of any kind until the completion of any and all civil and criminal litigation arising from the subject matter of this claim.

**AMOUNT OF CLAIM:**

This claim is in excess of \$75,000. Jurisdiction is designated as “unlimited” and jurisdiction would be in the United States District Court and/or Superior Court of the State of California.

DATED: March 15, 2022

Sincerely,



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John L. Burris  
Christopher A. Dean  
**Attorneys for Claimants**  
**Law Offices of John L. Burris**

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7677 Oakport Street Suite 1120 Oakland, CA 94621 (510) 839-5200 www.johnburrislaw.com

**CERTIFICATE OF SERVICE**

(Charles &amp; Hilma Cortez v. FBI.)

**STATE OF CALIFORNIA, COUNTY OF ALAMEDA:**

I am a citizen of the United States and employed in the county aforesaid; I am over the age of eighteen years, and not a party to the within action; My business address is 7677 Oakport Street, Suite 1120, Oakland, California 94621. On the date below, I served on the named parties and / or counsel of record: March 15, 2022.

Federal Bureau of Investigation United State Department of Justice 450 Golden Gate Avenue, 13th Floor San Francisco, CA 94102-9523	Government Agency on Notice
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The following documents in the manner checked below:

**TWO COPIES OF ADMINISTRATIVE CLAIM AND COVER LETTER**

- ☒ **(VIA MAIL – CCP §§ 1013(a), 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and placing each for collection and mailing on that date following ordinary business practices. I am readily familiar with my firm's business practice of collection and processing of correspondence for mailing with the U.S. Postal Service at Oakland, California, with postage thereon fully prepaid, that same day in the ordinary course of business.
- ☐ **(VIA PERSONAL DELIVERY – CCP §§ 1011, 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and causing each envelope(s) to be hand delivered on that day by \_\_\_\_\_, in the ordinary course of my firm's business practice.
- ☐ **(VIA E-MAIL OR ELECTRONIC TRANSMISSION – CCP §§ 1013(e), 2015.5, CRC 2008)** Based on a court order or an agreement of the parties to accept service by e-mail or electronic transmission, I caused the document to be sent to the persons at the e-mail address(es) or the facsimile number listed above. I am readily familiar with my firm's business practice of collection and processing of correspondence via facsimile transmission(s) and any such correspondence would be transmitted in the ordinary course of business. The facsimile transmission(s) was reported as complete and without error, and a copy of the transmission report is attached.
- ☐ **(VIA OVERNIGHT MAIL/ COURIER – CCP §§ 1013(c), 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and placing each for collection by overnight mail service or overnight courier service. I am familiar with my firm's business practice of collection and processing of correspondence for overnight mail or overnight courier service, and my correspondence placed for collection for overnight delivery would, in the ordinary course of business, be delivered to an authorized courier or driver authorized by the overnight mail carrier to receive




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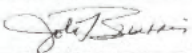
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documents, with delivery fees paid or provided for, that same day, for delivery on the following business day.

I declare that I am employed in the office of a member of the bar of this court at whose direction the service was made. Executed on March 15, 2022 in Oakland, California.



Christopher A. Dean  
Law Offices of John L. Burris

<b>CLAIM FOR DAMAGE, INJURY, OR DEATH</b>		<b>INSTRUCTIONS:</b> Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency:  Federal Bureau of Investigation - US Department of Justice 450 Golden Gate Avenue, 13th Floor San Francisco, CA 94102-9523			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code.  Hilma Cortez c/o Law Office of John L. Burris 7677 Oakport Street, Suite 1120 Oakland CA 94621		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN		4. DATE OF BIRTH [REDACTED]		5. MARITAL STATUS Single	
6. DATE AND DAY OF ACCIDENT 9/13/2021		7. TIME (A.M. OR P.M.) Unknown			
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary).  See attachment A					
<b>9. PROPERTY DAMAGE</b>					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code).  N/A					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side).  N/A					
<b>10. PERSONAL INJURY/WRONGFUL DEATH</b>					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT.  See Attachment A					
<b>11. WITNESSES</b>					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
Dorian Dawson  Faisal Alomari  Mohammed Aldahmi		N/A; Number: [REDACTED] [REDACTED] [REDACTED]			
<b>12. (See instructions on reverse). AMOUNT OF CLAIM (in dollars)</b>					
12a. PROPERTY DAMAGE		12b. PERSONAL INJURY		12c. WRONGFUL DEATH	
N/A		\$4 Million		Yes	
				12d. TOTAL (Failure to specify may cause forfeiture of your rights). \$4 Million	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side).  			13b. PHONE NUMBER OF PERSON SIGNING FORM 510-839-5200		14. DATE OF SIGNATURE 3/15/2022
<b>CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM</b>  The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			<b>CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS</b>  Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		



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16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☒ No 17. If deductible, state amount.

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

N/A

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☒ No

**INSTRUCTIONS**

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Claimants object to your Claim Form because it requires information which constitutes an invasion of the Claimant’s privacy. Moreover, the information is not required to be provided by the Claimants under California Government Code Section 910. For example, California Government Code Section 910 does not require that the Claimants provide their home and work numbers, driver’s license number, date of birth, auto insurance name and policy number, a diagram of the location of the incident, any statements by the Claimants as to their reasons “for believing the City is liable for your damages, “or a description” of all damages which you believe you have incurred as a result of the incident.” For the purposes of this document “CLAIMANTS” means the individual claimants and all parties in interest represented by the LAW OFFICES OF JOHN BURRIS. Therefore, Claimants submits the following information in support of his Claim pursuant to Government Code Section 910:

CLAIMANTS NAME: Charles Cortez & Hilma Cortez

ADDRESS TO WHICH ALL NOTICES ARE TO BE SENT: LAW OFFICES OF JOHN L. BURRIS, 7677 Oakport Street, Suite 1120, Oakland, California 94621

CLAIMANTS TELEPHONE NUMBER: C/O LAW OFFICES OF JOHN L. BURRIS, ESQ. (510) 839-5200.

PLEASE NOTE: COUNSEL REPRESENTS CLAIMANTS’ AND ALL CONTACT SHOULD BE MADE WITH THEIR ATTORNEY ONLY.

DATE AND TIME OF INCIDENT: September 13, 2021

LOCATION OF INCIDENT: At or near 2585 Fruitvale Ave, Oakland, CA 94601.

THE FOLLOWING PROVIDES A GENERAL DESCRIPTION OF THE INDEBTEDNESS, OBLIGATION, INJURY, DAMAGES OR LOSS INCURRED SO FAR AS IT MAY BE KNOWN AT THE TIME OF PRESENTATION OF THE CLAIM” AND “THE NAME OR NAMES OF THE PUBLIC EMPLOYEE OR EMPLOYEES CAUSING THE INJURY, DAMAGES, OR LOSS, IF KNOWN: [Per Government Code Section 910]. For the purposes of this claim, “AGENCY’S” is defined by and refers to the municipal, county, or government entity, which governs the Federal Bureau of Investigation

**DESCRIPTION OF INCIDENT:**

The incident took place on September 13, 2021 at or near 2585 Fruitvale Ave, Oakland, CA 94601. The incident arose when a plain clothed FBI agent came into contact with Mr. Cortez who was purchasing items from a local corner store. On the date of the incident, there was an outstanding warrant for Mr. Cortez’s arrest. However, the issues related to his outstanding warrant are not the subject matter of this claim. Our concern is Mr. Cortez’s contact with the FBI agent who violently murdered him without just cause.



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On the date of this incident, Mr. Cortez was in the U-U Smoke Shop purchasing items while his friend, Mr. Dawson, waited outside the smoke shop. Mr. Dawson stated that as he waited outside the smoke shop for Mr. Cortez to exit, he noticed a white car pull up behind him and park on the corner of Fruitvale Ave and Blossom Street. Mr. Dawson then turned to his left and saw a white male get out of the vehicle on the driver's side of the car and run around the front of the car. Mr. Dawson stated that the white male was wearing plain clothes and as he ran around the front of the car he was carrying what Mr. Dawson thought was a weapon. Video footage that was released by the Oakland Police Department, outside of the U-U Smoke Shop showed that the white male was carrying an object that resembled a gun as he entered the shop. Mr. Dawson stated that the white male then pushed past him yelling, "Get out the way" as he entered the U-U Smoke Shop. Mr. Dawson was afraid because he believed the man had a weapon so he moved down Blossom Street. Within seconds, Mr. Dawson heard a gunshot. Mr. Dawson did not hear the white male identify himself as a law enforcement agent nor did he hear the white male make any commands to Mr. Cortez once he entered the store.

In addition, Mohammed Aldahmi, who works at U-U Smoke Shop as a clerk and sold Mr. Cortez the items on September 13, 2021, stated that he saw a person dressed in regular clothes run into the store pointing a gun. Mr. Aldahmi thought it was a robbery, therefore he ran into a safe area. Mr. Aldahmi, is unaware if the white male identified himself as a law enforcement agent or made any commands to Mr. Cortez. Mr. Aldahmi only heard a single gunshot within seconds of the FBI agent entering the store.

**DAMAGES**

As a result of the FBI agent, whose identity has not yet been ascertained, actions, Mr. Cortez lost his life. Mr. Cortez did not pose a threat of serious injury or harm to the FBI agent during this incident. Thus, the violent assault on Mr. Cortez constituted excessive, unreasonable, unlawful and unnecessary force against him by the FBI agent and DOES 1-100.

**DESCRIPTION OF CLAIM:**

Claimants alleges that the conduct of individual employees, agents, and/or servants of the United States Department of Justice – Federal Bureau of Investigations constitute State statutory and federal tort violations, which might include but are not limited to assault, battery, negligence, negligent hiring, and intentional infliction of emotional distress.

Claimants alleges those individual employees, agents and/or servants of the Federal Bureau of Investigation are responsible for decedent's injuries, and acts and/or omissions committed within the course or scope of employment under the theory of respondeat superior. Respondeat superior liability includes but is not limited to, negligent training, supervision, control and/or discipline.

Claimants allege the appropriate offenses listed below.

Claimants will allege a lack of training, supervision and accountability.

Claimants will allege wrongful death.

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Claimants will allege loss of familial relationship.

Claimants will allege other causes of action subject to continuing discovery.

**DESCRIBE INJURY OR DAMAGE:**

Claimants has, or may have in the future, claims for general damages, including, but not limited to, claims for pain, suffering and emotional distress, and loss of familial relationship in amounts that exceed 75,000 and determined according to proof.

**NAME OF ENTITY BELIEVED TO HAVE CAUSED INJURY OR DAMAGE:**

**Federal Bureau of Investigation and DOES 1-100**

**DEMAND FOR PRESERVATION OF EVIDENCE:**

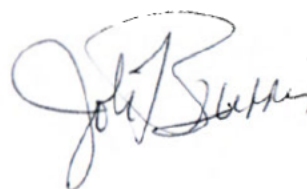
Claimants do hereby demand that Federal Bureau of Investigation maintain and preserve any and all evidence, documents and tangible materials which relate in any manner whatsoever to the subject matter of this federal Claim, including until the completion of any and all civil and/or criminal litigation arising from the events which are the subject matter of this Claim. This demand for preservation of evidence includes, but is not limited to, a demand that all public safety entities preserve all tapes, logs and/or other tangible materials of any kind until the completion of any and all civil and criminal litigation arising from the subject matter of this claim.

**AMOUNT OF CLAIM:**

This claim is in excess of \$75,000. Jurisdiction is designated as “unlimited” and jurisdiction would be in the United States District Court and/or Superior Court of the State of California.

DATED: March 15, 2022

Sincerely,



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John L. Burris  
Christopher A. Dean  
**Attorneys for Claimants**  
**Law Offices of John L. Burris**



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**CERTIFICATE OF SERVICE**

(Charles &amp; Hilma Cortez v. FBI.)

**STATE OF CALIFORNIA, COUNTY OF ALAMEDA:**

I am a citizen of the United States and employed in the county aforesaid; I am over the age of eighteen years, and not a party to the within action; My business address is 7677 Oakport Street, Suite 1120, Oakland, California 94621. On the date below, I served on the named parties and / or counsel of record: March 15, 2022.

Federal Bureau of Investigation United State Department of Justice 450 Golden Gate Avenue, 13th Floor San Francisco, CA 94102-9523	Government Agency on Notice
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The following documents in the manner checked below:

**TWO COPIES OF ADMINISTRATIVE CLAIM AND COVER LETTER**

- ☒ **(VIA MAIL – CCP §§ 1013(a), 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and placing each for collection and mailing on that date following ordinary business practices. I am readily familiar with my firm's business practice of collection and processing of correspondence for mailing with the U.S. Postal Service at Oakland, California, with postage thereon fully prepaid, that same day in the ordinary course of business.
- ☐ **(VIA PERSONAL DELIVERY – CCP §§ 1011, 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and causing each envelope(s) to be hand delivered on that day by \_\_\_\_\_, in the ordinary course of my firm's business practice.
- ☐ **(VIA E-MAIL OR ELECTRONIC TRANSMISSION – CCP §§ 1013(e), 2015.5, CRC 2008)** Based on a court order or an agreement of the parties to accept service by e-mail or electronic transmission, I caused the document to be sent to the persons at the e-mail address(es) or the facsimile number listed above. I am readily familiar with my firm's business practice of collection and processing of correspondence via facsimile transmission(s) and any such correspondence would be transmitted in the ordinary course of business. The facsimile transmission(s) was reported as complete and without error, and a copy of the transmission report is attached.
- ☐ **(VIA OVERNIGHT MAIL/ COURIER – CCP §§ 1013(c), 2015.5)** By placing a true copy thereof enclosed in a sealed envelope(s), addressed as above, and placing each for collection by overnight mail service or overnight courier service. I am familiar with my firm's business practice of collection and processing of correspondence for overnight mail or overnight courier service, and my correspondence placed for collection for overnight delivery would, in the ordinary course of business, be delivered to an authorized courier or driver authorized by the overnight mail carrier to receive


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documents, with delivery fees paid or provided for, that same day, for delivery on the following business day.

I declare that I am employed in the office of a member of the bar of this court at whose direction the service was made. Executed on March 15, 2022 in Oakland, California.



Christopher A. Dean  
**Law Offices of John L. Burris**





**U.S. Department of Justice**  
**Federal Bureau of Investigation**  
*Office of the General Counsel*

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*935 Pennsylvania Ave., NW*  
*Washington, D.C. 20535-0001*

September 16, 2022

**VIA CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

Mr. Charles Cortez  
c/o Law Office of John L. Burris  
7677 Oakport Street  
Suite 1120  
Oakland, California 94621

Re: Administrative Tort Claim for Damages

Dear Mr. Cortez:

This is regarding your administrative tort claim, dated March 15, 2022, which seeks \$4,000,000.00 in monetary damages from the United States for a wrongful death alleged to have occurred by reason of an incident dated on September 13, 2021. The Federal Bureau of Investigation (FBI) received your claim on March 18, 2022.

The FBI has denied your administrative tort claim.

If you are dissatisfied with our decision, suit may be filed against the United States in an appropriate U.S. District Court not later than six (6) months after the date of this letter.

Please direct any further communication regarding this request to Assistant General Counsel Brendan M. Horan. He may be reached by email at [REDACTED]

Sincerely,

A handwritten signature in blue ink, appearing to read "Paul R. Wellons", is written over a horizontal line.

Paul R. Wellons  
Associate General Counsel



**U.S. Department of Justice**  
**Federal Bureau of Investigation**  
*Office of the General Counsel*

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935 Pennsylvania Ave., NW  
Washington, D.C. 20535-0001

September 16, 2022

VIA CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Mr. Hilma Cortez  
c/o Law Office of John L. Burris  
7677 Oakport Street  
Suite 1120  
Oakland, California 94621

Re: Administrative Tort Claim for Damages

Dear Ms. Cortez:

This is regarding your administrative tort claim, dated March 15, 2022, which seeks \$4,000,000.00 in monetary damages from the United States for a wrongful death alleged to have occurred by reason of an incident dated on September 13, 2021. The Federal Bureau of Investigation (FBI) received your claim on March 18, 2022.

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Please direct any further communication regarding this request to Assistant General Counsel Brendan M. Horan. He may be reached by email at [REDACTED]

Sincerely,

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Paul R. Wellons  
Associate General Counsel